

Medical Release and Waiver

Medical

Insurance Company & Policy No. _____

Name of Policy Holder _____

Place of Employment _____

Family Physician _____

Address _____

City _____

State _____ Zip _____ Phone _____

Cell _____

Fax _____

List any medical, psychological, or emotional condition for which your child is being treated at the present time _____

List all medication he/she is currently taking _____

List all medications to which your son/daughter is allergic _____

Medical Treatment Consent and Liability Release

I, _____, do hereby grant permission for my child to receive necessary medical treatment in the event of an injury or illness while attending the Venessa Jacobs Volleyball Camp hosted at Southern University and A&M College. I except responsibility for full payment of any and all medical treatment. I hereby voluntarily and knowingly waive my right to asset any claim against volunteers, workers, including Student Health Service, Southern University, and their representatives, assistant coaching staff and Venessa Jacobs of the Venessa Jacobs Volleyball Camp, therefore releasing and holding harmless from any and all claims, demands, causes of action, expense and the exercise of this authority. I hereby confirm that I have carefully read and completed the above information regarding my child. With informed consent, I fully understand the implication of submitting the 2014 Medical Form for the Venessa Jacobs Volleyball Camp.

Parent/Guardian Signature _____ Date _____

Photo/Media Consent

I understand that photos and videos are occasionally taken at the Venessa Jacobs Volleyball Camps and that these photos and videos of my child may be used for Southern University and A&M College and the Venessa Jacobs Volleyball Camps publicity purposes. I have read and understand, and I agree with the photo/media release outlined above as it relates to my child.

Parent/Guardian Signature _____ Date _____

Summer Camp 1

Dates: Saturday, June 27th - Wednesday, July 1st

Entering Grades: 6th - 8th, Boys & Girls

Time: 8:30 am - 4:30 pm, Sat-Tues.

8:30 am - 12:00 pm, Weds.

Cost: \$225

Summer Camp 2

Dates: Sunday, July 5th - Thursday, July 9th

Entering Grades: 9th - 12th, Boys & Girls

Time: 8:30 am - 4:30 pm, Sun-Weds.

8:30 am - 12:00 pm, Thurs.

Cost: \$225

Registration

Register online at www.jagsvolleyballcamps.com or send in completed registration/consent form with check or money order made payable to Venessa Jacobs. Camp refunds may be given if a cancellation is given one week (7 days) before camp begins minus a \$50 administrative fee. No refunds will be issued for any reason once a camp session has begun.

Camp Prices

Team Cost per player \$150.00
(must have 6 or more players)

Individual \$225.00

On-site Registration \$250.00

Venessa Jacobs Volleyball Camp

Phone: (225)771-3184

E-mail: venessa_jacobs@subr.edu

Venessa Jacobs Annual Volleyball Camp

Summer 2015



jagsvolleyballcamps.com

Venessa Jacobs Volleyball Camp Head Coach



Venessa Jacobs is the head volleyball coach at Southern University.

Before taking over the program, she served as the assistant coach under “Coach Denu” for four seasons.

Jacobs played volleyball and basketball at Ventura Junior College in Ventura, Calif., earning NJCAA All-American honors and being named to the Ventura Hall of Fame before transferring to LSU for her final two seasons of collegiate eligibility.

While at LSU, the Oxnard, Calif. Native earned first and second team All-SEC honors. Jacobs also lettered as a member of the LSU women’s basketball team in 1994-95.

Jacobs earned her Bachelor of Arts degree from Louisiana State University in 1996 with a major in general studies and minors in sociology, psychology, and physical education.

General Camp Information

⇒ General Info

The non-residential camp is open to boys and girls entering 6th–12th grade. Campers are grouped according to age and volleyball experience. The focus of the camp is to build and enhance volleyball skills. Throughout the camp, players also learn the importance of teamwork. Each camper will receive a camp t-shirt.

⇒ Facility

Camp activities will take place in Seymour Gym.

⇒ Camp Schedule

Camp hours are 8:30 A.M. –4:30 P.M. Campers should be picked up no later than 5:00 P.M. Lunch will be held from 12:00–1:30 P.M. Campers may bring their own lunch or bring money to purchase lunch from Subway. The last day of camp will include a closing ceremony and campers are asked to be picked up promptly at 12:00 P.M. Please be advised that constant supervision will be provided. Campers will not be allowed off campus except under the supervision of the camp staff, parent, or legal guardian.

⇒ Rules

Venessa Jacobs Volleyball Camp reserves the right to send a camper home, without refund, if he/she does not conduct themselves in a manner that will enhance safe learning, good sportsmanship, and willingness to follow directions.

⇒ Items to Bring

- ◇ Volleyball Shoes
- ◇ T-shirts
- ◇ Shorts/Spandex
- ◇ Knee Pads
- ◇ Socks
- ◇ Water Bottle
- ◇ Camp Store \$

Camper Information

Camper Name: _____

Camper Cell Phone: _____

Camper Email: _____

DOB: _____ Age: _____

School: _____

School Coach: _____

Club Team: _____

Position: S OH/RS MB L/DS

Tshirt Size: S Youth M Youth L Youth

Adult Size: S M L XL 2XL

Contact Information

Parent (s) Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Home Phone: _____

Parent’s Cell Phone: _____

Parent’s Email: _____

Emergency Contact

Name: _____

Relation: _____

Cell Phone: _____

Name: _____

Relation: _____

Cell Phone: _____